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CONFIRMATION NO. 7407

Bib Data Sheet

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/672,424	09/28/2000 RULE	712	2183	5231.31-0127BS

APPLICANTS

GURJEET SINGH SAUND, SUNNYVALE, CA;
 SHAILESH THUSOO, UNION CITY, CA;
 T.R. RAMESH, UNION CITY, CA;
 RONAK PATEL, SANTA CLARA, CA;
 KORBIN S. VAN DYKE, SUNOL, CA;

** CONTINUING DATA *****

THIS APPLICATION IS A CON OF 09/626,325 07/26/2000
 WHICH IS A CIP OF PCT/US00/02239 01/28/2000
 WHICH CLAIMS BENEFIT OF 60/176,610 01/18/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/02/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	CA	48	53	11
Verified and Acknowledged	<i>Reu</i> <i>Examiner's Signature</i>	Initials			

ADDRESS

David E Boundy
 SCHULTE ROTH & ZABEL
 919 Third Avenue
 New York ,NY 10022

TITLE

COMPLEX INSTRUCTION SET COMPUTER

FILING FEE RECEIVED 1908	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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SERIAL NUMBER 09/672,424	FILING DATE 09/28/2000 RULE	CLASS 712	GROUP ART UNIT 2183	ATTORNEY DOCKET NO. 30585/31-127
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APPLICANTS

GURJEET SINGH SAUND, SUNNYVALE, CA ;
 SHAILESH THUSOO, UNION CITY, CA ;
 T.R. RAMESH, UNION CITY, CA ;
 RONAK PATEL, SANTA CLARA, CA ;
 KORBIN S. VAN DYKE, SUNOL, CA ;

** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 02/02/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 48	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 11
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

DAVID E BOUNDY
 SHEARMAN & STERLING
 INTELLECTUAL PROPERTY DOCKETING
 599 LEXINGTON AVENUE
 NEW YORK , NY 10022

TITLE

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